**Interviewee:** Jill Smith

**Interviewer:** Rachel Knutson

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**Location of Interview:** Menomonie, Wisconsin

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**Abstract:** Dr. Jill Smith is a retired professor from the University of Wisconsin Eau Claire, she currently lives in Menominee Wisconsin. In the interview she talks about how Covid-19 has affected her family and her work within her community. As she started the pandemic as a caregiver for her huband who unfortunately passed in January. When she talks about her job as a contact tracer for Dun County and how that has shaped her life. While she also volunteers at Steeping Stones and interacting with her community. Commenting on the political side to how her community adapted to the pandemic. Concluding with her perspective on how the future may look with the new Omicron variant.

 **Jill Smith 00:00**

They say the nest.

**Rachel Knutson 00:02**

Alright, so I am Rachel Knutson. Today is December 8 of 2021. And the current stats for the US the total cases are 49,198,764. The total deaths in the US is 787,064. And going into Wisconsin, we have 997,688 cases, our total death count is at 10,134. And to do a comparison, Minnesota right now is at 933,025 cases, and the total death count for Minnesota is 9,780 deaths. And overall, the vaccine percentage for the United States is 59.9%. And so we'll go on and start here. So if I can have you introduce yourself to if you're comfortable, share some demographics, age, race, ethnicity.

**JS 01:09**

Well, I'm Dr. Jill Smith, I retired from teaching at UW Eau Claire in 2015. My background is in medical anthropology and I also have a degree in preventive medicine epidemiology. I have a career history of working in research, teaching, grant writing. Pretty much all over the ballpark if with these degrees.

**RK 1:45**

Really nice.

**JS 1:45**

Anything else you want to know?

**RK 01:48**

Well, we'll start with the next one is like where do you live and what it's like to live where you live.

**JS 01:54**

I live in Menominee, Wisconsin, it is a relatively small university town here in western Wisconsin. We initially lived here because it was mutually convenient between my and my husband's employment. I like it, because for one critical reason is that I have a very strong social support network here. And living is, shall we say, living as easy is affordable, and reasonably comfortable and reasonably safe.

**RK 02:27**

All right, um, so just kind of going into a little bit more about your daily life. What do you do on a normal day, like any jobs, activities, what do you do? do on a normal day.

**JS 02:38**

Normal day is very different from what it was last year. Last year, I was taking care of my husband, he was at this point in time slowly dying from a brain tumor.

**RK 2:52**

Oh, wow.

**JS 2:52**

And so all my time and efforts were consumed with trying to get him care. Now, my daily activities generally are dramatically reduced. My I work four days a week on doing contact tracing. Otherwise, I do significant volunteer work with stepping stones and the county Democrats and the Unitarian Universalist community. I tried to keep busy. I think that's one of the more critical survival techniques for being here in at this point in time in the COVID- um- pandemic. Ah- I have two cats that keep me grounded, and keep me on track. They make certain I'm up by seven in the morning. I'm not allowed to sleep till noon anymore.

**RK 3:51**

All right.

**JS 3:51**

 And- is the activities of daily survival.

**RK 3:58**

All right.

JS 3:58

In this day and age.

**RK 04:00**

That's, that's really great that you're keeping active and just trying to find some things to do. Um, so just COVID as a whole, what was your first reaction to it? Like what was going through your head when you first heard about COVID and coming to the US and our area?

**JS 04:15**

Well, to be perfectly honest, I was sort of delusional, I didn't think that we would have more than like 100,000 deaths. I thought it would stop fairly quickly. I was thinking in terms of the flu, the influenza on a regular basis, not anticipating how serious this was. I joined COVID contact tracing in July of 2020. So pretty much at right in the heart of when it was taking hold in the United States. And I have been doing it almost continuously for a year and a half.

 JS 05:01

 Um, I, I was very busy. And so that actually helped a great deal. And also, again, being in a small town, there were significant options, for

RK 5:12

Yeah

JS 5:12

Survival, I did not have to stay sequestered in my home, I could walk around outside, my husband and I both went on long walks. While we could, ah we could know, survival wasn't hard. I don't, I wasn't faced with a lot of the same stressors that people with families, young families were I didn't have to take care of a child doing some testing, I didn't have to. Well, I worked from home, but it was set up to work from home, I didn't have to try to make alternative arrangements to try to work while I was at once, in one sense, an essential worker, I was an essential worker that had the options or had the benefit of having to work from home.

Rb 6:09

Yeah

JS 6:09

And I had the resources. And I can see how this would be significantly more difficult for somebody without the resources or somebody who was significantly older, and didn't know how to manage in an increasingly complex environment.

RK 06:29

Yeah. Very great description of this whole event. Like we're all just trying to get through it and go about our daily lives here. And you've kind of touched on but how has your life changed because of the pandemic or just your day to day life? Like, really? What has changed the most for you from the start of COVID?

JS 06:48

Now, that's a really hard one, because in the process, I lost my husband. And so a whole bunch is less. oh, by the way, this is my supervisor.

RK 6:59

All right.

JS:6:59

Young, this young lady has to attend every single Zoom meeting that I'm on.

RK 7:04

Well, great to see her.

JS 7:04

This is Tripper.

RK 7:08

All right.

JS 7:08

[laughter] Okay, how has it changed from COVID? I'm more careful. I have certain policies that I try to follow. Most of the time, when I go to a store, I get halfway to the front door and have to turn around and get a mask. I have to remember that mask that's a hard one. And - social setting social get togethers or again. There's always that undercurrent of “Is this safe? Is everyone vaccinated?”

RK7 :48

Yeah.

JS 7:48

And again, because of who I am, and the social network that I have developed over the years. Pretty much everyone that I interact with on the outside of the work that I do with contact tracing, everyone that I interact with on a face to face is-is vaccinated. So that has made life a lot easier for me.

RK 8:13

Yeah

JS 8:13

This is not going to be the same for somebody who has a family close by who's refusing to get vaccinated, or even a spouse or other family members in the household.

RK 8:24

Yeah.

JS 8:24

 I live alone now.

RK 8:26

Yeah.

Well, other than my supervisors here. And so while my life has changed, I can't say that COVID has made it a lot worse. I would be profoundly happy if this were over.

RK 8:53

Mm hmm. Um, so just kind of going into because you took care of your husband during that whole process. Correct?

JS 08:59

Correct.

RK 9:00

All right.

JS 9:02

He was diagnosed he was diagnosed two weeks before the first shutdown.

RK 09:04

Oh, wow. That's really close to everything happening.

JS 09:07

That's right.

RK 9:09

That's

JS 9:09

So, I had I had a heck of a distraction.

09:13

Yeah. So did COVID effects being a caregiver for your husband in any way?

09:19

Oh, good heavens, yes. Initially, when he was hospitalized, I could go and spend as much time as I wanted to. With him. Most of the time, he was down in Eau Claire. But after the initial stages of the shutdown, all I could do was drop him off at the hospital for his treatment and then pick him up a few days later.

RK 9:43

That go to be rough

JS 9:43

And we talked a lot. Eventually, as it got really bad. He couldn't get treatment in Eau Claire and he had to go all the way to Rochester.

RK 9:53

Wow.

JS 9:54

And so we actually spent a lot of time on the road going to Rochester. And then while he was dying, then we had all kinds of difficult issues trying to spend time with him.

RK 10:12

Yeah.

JS 10:13

In the hospital, he was actually at the hospital for the last three days instead of here at home. And my family came, well, my daughter and son and their spouses came up. And we tried to cycle through. So he was never alone.

RK 10:32

Yeah

JS 10:32

It was, it was, you know, an up and down in and out. And then after that the big challenge was trying to get a vaccination initially.

RK 10:45

And was the hospital like, really? Because obviously, towards the end of his life, like would you wanted to go see him was the hospital accommodating How was like the hospital handling it?

JS 10:54

I was very fortunate at that time, because they had opened up visitation to five people. And that's what we were five people are perfect.

RK 11:03

Perfect

JS 11:03

They didn't want five people there at one time. But they realized that this was, first off, we were all vaccinated, oh, we weren't all vaccinated, most of us were vaccinated. And it and they were just very kind we did get tested every other day down at Stout, so that we had a PCR test, I mean, not the PCR, the antigen test, to verify and help them feel comfortable with letting us spend the last few days of his life.

RK11:36

like, I haven't experienced anyone going into hospital. So it's great to hear someone else's like point of view. And I just know that's really rough. Definitely not being able to go see and limiting people and I can’t imagine

JS 11:47

I can't I can't imagine abandoning him at the hospital door.

RK 11:52

Yeah, no.

JS 11:52

I not being able to spend time with him.

RK11:54

Yeah, I'm great. I'm very thankful that you were able to have a good experience and be able to be there because I know, that'd be extremely rough if you.

JS 12:04

Yeah

RK 12:04

Wouldn't have been able to be there and just take part in those last moments.

JS12:10

Yeah.

RK 12:11

Um, so kind of bringing it back out to a little bit more bright and cheerful things kind of how did you get into contact tracing. [laughter]

JS 12:17

My next door neighbor is a public health nurse.

RK 12:21

Oh really.

JS 12:21

We were- met each other walking around that, while we were, you know, everybody was trying to get their exercise during COVID.

RK 12:31

Yep

JS 12:31

And I said, you know, I could do this. And I gave her some back my background, and she got in touch with the public health director, public health director contacted me. And I was hired. That's the first point when they were, they were doing all the contact tracing just with the public health nurses.

RK 12:54

That’s go to be rough.

JS 12:55

And it was terrible. I mean, we were still trying to figure out how to do this. And it wasn't just a matter at that point of trying to trace immediate family members, we had to trace everybody that they had been in contact with more than 15 minutes. that they've been in contact with since they became infectious. So sometimes, the contact lists were anywhere from 10 to maybe even 30 pages, 30 items long.

RK 13:26

Wow.

JS13:27

And that was very hard that we had to call the all, we had to put them all in quarantine, and a lot of them had absolutely no desire to go into quarantine. Although by that time, most people did understand. So the public health nurses were be really - [ chuckel] having a very difficult time.

RK 13:46

Yeah

JS 13:46

Both physically and emotionally. So as a result, they started hiring in those of us who are outsiders, and not by outsiders, but non public health nurses, a lot of us. Matter of fact, virtually all of us are retired. I think there's a few young people who are students. And a few people I guess, about three or four outsiders that are not part of the public health system but have other jobs. But the bulk of us that that have stayed with this longest are - retired, retired nurses, retired nursing home administrators, retired educators.

RK14:26

Well, that's like a very wide range. I did not realize there's that many people taking part in this do- do people stay long contact tracing, or is it just a short time?

JS14:34

Well, that's the that's the issue. I have been the longest shall I say serving excuse me, I have. I don't have a cold. I have a very tight house.

RK 14:46

Oh.

JS14:48

And eyes tend to water. I'm the longest serving one, year and a half I believe. There are a couple who have now served for a year. We've worked for a year. I have worked on and off. Over the course of a year and a half, I of course stopped while my husband was getting worse.

RK 15:15

Yeah

JS 15:16

And then a lot of us stopped back in June because there were no cases.

RK 15:21

Really.

JS 15:21

Cases, cases dropped to the point where they didn't need us anymore. And so we got laid off, and then in August, it started getting bad again. And so we all came back. There were quite a few of us that did that. They just said, “Would you mind being laid off for a while?” That's fine.

RK 15:36

It's like, did you expect to have that layoff there, or did you expect to come back?

JS 15:40

I did expect a layoff. I didn't expect to come back. I really thought that my goodness, we're really, really doing well. It didn't work. One of the reasons it didn't work was that as a critical mass of people did not get vaccinated. So they maintained the virus within the community. And as those people who were vaccinated - their immunity began to drop a little bit, then we started having lots of breakthrough cases. And I've had a significant number of breakthrough cases now. They tend to, they tend to do much, much better over the course of the disease. I myself and I had a breakthrough case.

RK 16:30

Oh, wow.

JS 16:31

And it was very mild, relatively mild. Came through it on the other side, no problem. Just, as far as I'm concerned, it just added to my immunity, but some of them are, I mean, it still just is a life disrupter, this disrupts daily activities, it, it causes, it still causes lots of problems. Even for those of us who are vaccinated, even if we are not getting breakthrough cases, it's still a huge disrupter.

RK 17:04

Yeah, I'm sorry, I'm in a room with lights that flick on and off. Um.

JS 17:09

Yeah.

RK 17:10

So um, obviously, when you're talking to these people, and like, when you first started the idea of like self isolation, flattening the curve, or just like some key things that have come out of the pandemic here, um, how did they respond when they got that call to like quarantine or just use some of those phrases that have come out of this pandemic?

JS 17:29

By the time I started this, most of them understood.

RK 17:33

Alriht

JS 17:34

And remember, they got tested, meaning they had some sense that this was an issue that there was a problem. Very rarely, very, very rarely have I contacted somebody and they didn't know their vaccinate, or their - their disease status, they didn't know they were already know they were positive. They are told when they get tested, this is what you're going to have to do, you're going to have to isolate whether to this, you have to do that. So they hit up at a number of different levels.

RK 18:05

Yeah.

JS 18:05

To what is expected of them and how to take care of themselves. And they also know they're told, probably at the time they're tested, or very shortly thereafter, that they will be contacted by public health. So they know this. This is not new information to any of them. Unless they have been living in a hole somewhere.

RK 18:29

Yeah [chuckle]

JS 18:30

They pretty much everyone I've talked to knows - knows the drill.

18:35

Right? It's like even though it's like secondary people, when you first started and having to go down that 30-30 people that they were in contact with was their struggle with going to those secondary people that they really didn't see much of the person?

JS 18:48

There was some issues there. There were some issues, but we fairly quickly transitioned out of that. I won't I won't say that fairly quickly by I start we were doing that in July by October I believe. When things are getting really bad. We started just contact tracing within the immediate family and maybe some extended family members that were spending a great deal of time with the diseased individual.

RK 19:22

All right. Um, so obviously you're talking to these people that have this do you see like mental health issues. When you're talking to someone does, do they seem stressed or just how do they react?

19:32

 In many cases, particularly if they're children involved? There's tremendous stress. Sometimes there's tears, sometimes there's just venting. Very rarely have I been, shall we say ripped a new one. Occasionally now not before, not before the vaccines but now you will or I will, or all of us will find people who are hardcore conspiracy theorists and anti vaxxers. They're angry. But yeah, what's interesting is that in most cases they're compliant.

RK 20:16

Really?

JS 20:17

Yes. Very rarely have a matter of fact, I personally have not found somebody who has not said that they would, who I said that they will not isolate. And one of the good things is, is that employers tend to take this very seriously.

RK 20:35

Yeah.

JS 20:35

And they know that they can get into trouble. If they have children. Again, it's very stressful. One of the hardest things that we're finding is when a child has it.

RK 20:49

Yeah.

JS 20:49

Child.

RK 20:50

Oh, wow.

JS 20:51

You can't isolate a small child.

RK 20:52

Yeah.

JS 20:53

So the isolation times for the whole family gets to be really, really complex.

RK 21:00

Yeah.

JS 21:00

The - this if this happens, then that happens if you if you can't keep the children separated, then the children have to quarantine for such and such a length of time. And we have had some little people that have been out of school for four weeks by house.

RK 21:15

Wow.

JS 21:16

Because they can't go back because they can't isolate and every time somebody inthe family gets it again, or it just the isolation for the children just keeps moving down the pike.

RK 21:29

Yeah

JS 21:30

And then that means there's a parent that also has to - do this isolation quarantine with the child. So it's, it can be exceedingly difficult for families.

RK 21:44

And as you were saying, like the public health like nurses and stuff that were first doing this, do you have any mental like, like attachments to these people?

JS 21:53

Oh, Yes

RK 2:55

Do you feel sad when you come home? Like how is that affecting your mental health?

JS21:58

My mental health? [laughter] Got all kind of messed up with my husband's?

RK 22:05

Yeah, It's a little hard question.

JS 22:08

My mental health, I feel very close to these people. Very friendly with them. I'm hoping like, Heck that when this is all over, we have a big party and I get to finally be in the same room with some of these people.

RK 22:24

Yeah that would be cool

JS 22:25

I've had. When I finally got my COVID shot, my vaccination was the first time I had seen most of these people in person.

RK 22:34

Wow.

JS 22:37

Especially the public health nurses, I did not see the woman who trained me until she gave me a vaccination.

RK 22:45

Wow.

JS 22:46

And that was almost a whole year into my working with.

RK 22:52

Wow.

JS 22:53

So it's been it's been a real pleasure being able to see some of these people. I just hope there's a real blowout party.

RK 23:00

Yeah.

JS 23:00

[laughter] Without masks.

RK 23:03

Yeah. It's like I can see

JS 23:04

Gonna happen. I don't think that's gonna happen. But that's what I'm wishing for.

RK 23:08

It's like, I think all of you guys really deserve something like that. Just just to give you guys support from the community because I'm the Community enjoys what you're doing. And you're just helping support every once.

JS 23:18

 Every once in a while somebody says that every once in a while, of course, you get just the opposite.

RK 23:25

Yeah. I just think it's important to thank anyone that's just trying to help the community as a whole. And I can definitely tell that you like try to help the community in different ways. So

JS 23:35

it's community, there's also a personal element to this. I got to be busy, I got to feel like I was doing something to make things better. That was important.

RK 23:48

Yeah.

JS 23:48

That was very important. I have a sister who lives in Chicago and she commented that - she's sort of in these me that I've been able to do this and feel like I am actually trying to improve. I don't want to say make the world better. I don't think we're all better. But I definitely am serving the community as made me feel like I'm not helpless.

RK 24:19

Yeah.

JS 24:19

that I'm sitting back twiddling my thumbs and feeling frustrated and upset that the world is inflicting something on me I'm trying to inflict back. [laughter]

24:31

Yeah. Like I love that way of saying it. And you said you volunteer at like stepping stones and stuff like that. How have you seen volunteer change volunteering change since Covid and everything?

JS 24:42

Well, and everything like mask wearing is right off top.

RK 24:44

Yep.

JS 24:47

And it's very nice when you can have a very tiny little social gathering and not have to wear a mask and you can actually hug people which is lovely. You don't really realize how much you miss hugs.

RK 25:01

Yeah.

JS 25:02

Oh, you've isolated by yourself.

RK 25:05

Yeah.

JS 25:05

really, that's interesting how that's really important.

RK 25:07

Yeah. And

25:09

 I would, on the flip side, I would love to meet your dad. [laughter] In person, he's been a lovely person to work with

RK 25:17

It like, my dad is - I learned a lot from his interviewer and just about contact tracing, and you're just adding so much more to the story. And it's very fun to hear all these different sides about this pandemic, from health care workers

JS 25:31

Because he sent us an essential position, he had a slightly different experience, because he hasn't had to stay isolated from the rest of the community. He's actually been right up front. So. And to be perfectly honest, I think the busier that you were, during the shutdowns, the lock downs, or actually, during just this whole process, probably the better off you survived.

RK 25:59

Yeah.

JS 25:59

Particularly, if you had the type of position that you felt like you were making an impact.

RK 26:03

Yes. And as my dad being an EMT, it's I was also reflecting on myself and just realizing how much my dad was going through without telling me but

JS 26:15

Yeah.

RK 26:15

It was just very eye opening. And it's just eye opening to hear different perspectives of people helping the community because we all appreciate that. So

JS 26:23

I'm glad to hear that. That's important to hear. [laughter]

RK 26:27

And Do - do you see volunteer, volunteering, opening up for the community again, because like, stepping stones reaching out more for volunteers, though,

JS 26:37

They always need volunteers. But right now they have this core of individuals that they know, number one always show up number two are vaccinated and number three, are willing to follow

RK 26:51

Yeah.

JS 26:52

Regimen, or regimen. There are a lot of other places where you can actually do volunteer work. But they have to be very careful, they have to limit outside interaction. And they obviously want to make sure that you're vaccinated and that you follow protocols to reduce infection rates.

RK 27:19

And just as volunteering, if you're working with someone that may not have those options available, it's really important to have those things. And have you been receiving positive feedback from people that you're volunteering with about people still willing to help?

JS 27:32

Yeah, That plus, I sort of become the go to person when they have questions about should we do this? Should we do that? What are the rates in the county? Is this dangerous? Is this not dangerous? Oh, my goodness, Jill, is this COVID? Or is this not COVID? Should I get tested? Or should I not get? And so I'm sort of that I'm not a physician. So I can't say, you know, oh, you're fine.

RK 28:03

Yeah.

JS 28:03

I what I can say is, yeah, I think you need to get tested, and it's just really reinforcing what they already know that they need to do.

RK 28:10

Yeah, it's, um, it just makes me so happy to hear that you're doing all these great things for the community, because I do live near you. So it's great to hear that. People are still volunteering and helping people. It just makes my day.

JS 28:23

We’re still giving it a shot. Well, you see, and then again, we get to a lot of us who are volunteering or people like me living isolated lives. And it gives us another opportunity to socialize, and yeah, around people that we feel comfortable with. And again, we know their vaccination status, we feel good about working collectively with them. And they essentially had the same feelings about this, you know, tackling this problem at a county level?

RK 28:56

Yeah. And since you like work so much with the community has you have you seen Menominee change as a community? Or are people just still trying to be together and do things?

29:10

Both. There is a hardcore group of individuals who are still going to bars.

RK 29:16

Yeah.

JS 29:17

Not wearing masks, and they're doing and possibly even doing it more than they did before as a as a demonstration of defiance. So demonstrating that defiance, has been very important for some.

RK 29:37

Yeah.

JS 29:38

And the refusal to wear masks, and sometimes they get they are a little surprised when they get sick. And then also, sometimes they're very surprised that they get as sick as they do. And they tend to listen better at that point. [laughter] The other thing is, is that I found a lot of people who aren't vaccinated but they aren't actually tie vaxxers. They just need that extra little push or kick in the dairy air.

RK 30:10

Yeah.

JS 30:10

To get there. And one of the things that's always been useful, as I found recently is that if you tell them to that, and this is true, I'm not making this up that we have found that after somebody has had the the Coronavirus, if they get vaccinated after that, then they have what we call super immunity.

RK 30:30

Oh.

JS 30:31

And that sort of pushes a lot of them over the edge.

RK 30:34

Yeah.

JS 30:35

And particularly the young men for some reason, I think they like the idea of super immume

RK 30:41

Love that. And kind of going off with like vaccines. Is it easy to get vaccines in Menominee? County? Or

JS 30:50

oh, god, yeah, it's very easy. You know, pretty much it's almost a walk in situation, every single drugstore, pharmacist can do this, medicine shop, Walgreens, CVS, Walmart, you can arrange through your through any of the hospitals, or any of the clinics. Public health has vaccine clinics that you could sign up for and even do a walk in, you don't necessarily have to be signed up, they'll - they'll take just about anybody and try to get them going here. It is very, very easy. If you're, if you're serious about doing this, we will be more than happy to give you the list of all the resources. And you can get of the three verified vaccines, yet. Any of the number? I mean, all three of them. Well, you don't want to get all three of ones, but you can get any one that you want.

RK 31:56

Yeah,

JS 31:56

so generally, no questions asked.

RK 32:02

And when you're like contacting people, or people like asking a question, are they taking that initiative or

JS 32:08

very rarely?

RK32:11

It's like you kind of have a conversation with them.

JS 32:13

I have to start the conversation. And I can tell if they're, I can go to the back the statewide vaccine record and see if they are not vaccinated. I still ask the question because we had a number of people who were vaccinated in Florida or vaccinated by the VA, which does not feed into that file, or vaccinated in Minnesota. So you have to ask the question.

RK 32:39

Yeah.

JS 32:39

But then you lean on and I say, “Well, can I talk to you about getting vaccinated when you're done with this?” And some say no. And some says, I've been thinking about it. I say, Well, let me give you a little bit of a heads up on this. I talked about Super immunity, and I talked about breakthroughs. And I also talked about long term COVID. And the fact that we have no, idea, what the long term consequences are going to be for people who've had this disease.

RK 33:11

Yeah.

JS 33:12

I mean, polio Case in point, it was something called the post polio syndrome. And it came back chickenpox. You can get shingles from chickenpox.

RK 33:20

Yeah.

JS 33:20

So the vaccination hopefully, will prevent any of these long term consequences that are going to come back and haunt them in the future. And we're seeing a lot of people getting this disease, as you know, and it's very important that they have they think prospectively, they think down the road a little.

RK 33:44

And is there like any major questions that you get all the time about the vaccines? Like, do you get those weird conspiracy questions? Or do you just get some like simple?

33:54

They don't ask, okay, they if they have if they're all if they bought into the conspiracy stuff, they don't ask questions, they start telling me things they say.

RK 34:02

Yeah.

JS 24:02

This this, this and this. Most recently, somebody's talking about a vaccinated cousin who's fighting for is and that's the other thing that's become problematic. The fact that we do have breakthrough cases.

RK 34:14

Yeah,

JS 34:14

That people like Colin Powell have died from long term consequences from the vaccine. They pick up on that and use that as a reason to not get vaccinated.

RK 34:25

Yep.

JS 34:26

That and while you get it anyway, and you die anyway and they don't want to deal with the reality that okay, out of every 1000 People that are hospitalized right now with Coronavirus. 975 are not vaccinated. 25 might be vaccinated but 975 are not you understand that relationship there? Yeah. Of the people that die from this

RK 34:55

Yeah.

JS 34:56

And and then the - those who died tend to have very serious underlying conditions.

RK 35:07

Yeah.

JS 35:07

That was essentially the case of Colin Powel, which was very sad that I got I was, I lost a lot of respect for Aaron Rogers. Oh, you use that as an excuse. He was mumbling fumbling around with that. And I think a lot of people lost respect for the gentleman when he went down that rabbit hole.

RK35:27

Um, and as you as a contact tracer, you're obviously working for kind of like the county, but also kind of like the state. Do you think that locally like Menominee, Dunn County has been doing a good job with government positions or like just mandates within Dunn county or Menominee?

JS35:43

Well, we could go down the school district issue, because this is districts. Some did, some did. And the schools had been hit very, very hard.

RK 35:57

Yeah.

JS 25:57

Very hard. And we're sort of at the core of a lot of this surge that we've had since August. It's - it's got very bad for Thanksgiving, it was really bad here in this county. So I don't think the school board's followed through as a government entity, they're not really government entity, but they are

RK 36:21

Yeah.

JS 36:21

I know that we are a rural county. And that means that we have some very conservative views about government about individual freedom, which if they drive on the right side of the road, they've already violated [laughter] their concept of individual freedom.

RK 36:46

I a good one.

JS 36:46

It's a bologna. I'm sorry, it's a bologna rationale. Again, it's very political, and it's become part of political identity.

RK 36:55

Yeah.

JS 36:56

It has nothing to do with individual freedoms.

RK 37:01

Yeah.

JS 37:01

So at any rate, going back to your original question. I don't think that our county manager had much power to do anything the school board's did. But they tended to drop the ball on that one, as far as I'm concerned, and we could have reduced this serge, not prevented it, but reduced it. Our death rates now are up around. I think the number of deaths are up from 53,54. In terms of deaths from COVID, in this county, we're better than most but in terms of infectious - infections, and then in turn, long term consequences, or one the worst for the state.

RK 37:54

Like what do you think the school districts could have done better? Like more mask mandates more

37:59

More mast mandates, ensuring that everyone in the schools they made it, not a mandate? So the mask or you could not mask?

RK 38:12

Yeah.

JS 38:12

And they should have mandated iythey the showed no political will.

RK 38:20

Alright

JS 38:21

They showed no backbone?

RK 38:22

And would there be like, would you have thought that it would have been better to have more online option or just try to social distance

JS 38:29

They still have, they still have a good online option. Social distancing would have been difficult. But still, social distancing, as much as it was reasonable and then mandating masks like that would have, as I said, it wouldn't have prevented it, but it would have made it a lot. A lot easier, a lot lower. They were actually we were actually closing classrooms.

They got so bad, even prior to Thanksgiving. So.

RK 38:59

Oh wow. And have you seen the college in your town affect a lot of the cases or is it more

JS 39:05

The college actually is doing very well. They have the online options. They're very good at monitoring. And if you will remember the university? I think they made over 70% of I mean, they got to the record of 70% of students being back 70% Plus, speak vaccinated according to the region's request, so they did fairly well. Our county wide vaccination rate, I think, is an undercount. Because when we did or when the US did the census, and people are counted against their primary residence, everybody was in virtual learning.

RK 39:59

Yeah.

JS 40:00

And So all of these students were vaccinated if they were vaccinated were vaccinated in their home county. So

RK 40:07

Yeah.

JS 40:08

Residents of county, they weren't counted toward our statistics.

So it I'm fairly certain it's an undercount, certainly for that population.

RK 40:18

And do you see the Dunn county doing more vaccines? Do you think that percentage is gonna rise? Or do you think it's kind of settled?

JS 40:26

Well, let's put it this way can't go lower.

RK 40:31

Yep that's true.

JS 40:31

Only can go up. Yeah. So I think it is going up. But what's mostly going up I believe, and I talking off the top of my head on this one are the boosters. But

RK 40:43

Alright

JS 40:43

Busters are really important. One of the problems and we see this as a problem is that we are seeing breakthrough cases in vaccinated people. But they unfortunately tend to be asymptomatic. So they don't know they're carrying the virus.

RK 41:00

Yeah.

JS 41:00

And they don't know if there's a potential for spreading the virus.

RK 41:06

Yeah.

JS 41:06

And so And which is why even vaccinated people need to be masked.

RK 41:15

And.

JS 41:16

That's a hard one to grab that's wrap

RK 41:17

Yeah

JS 41:17

Your head around that being vaccinated and possibly getting a breakthrough case. You may actually be putting other people at risk without even knowing it. The point is, they are trying their best. Which is one of the reasons why I always mask even when I am vaccinated.

RK 41:38

Yeah. Have you seen when you go to like Walmart, per se, is the majority of people wearing masks not wearing masks? How is going to the grocery store?

41:46

50/50, 50/50 the people in my age range, and I put myself in a retired age range, maybe 55 on up. We tend to be masked? It really depends.

RK 41:59

Alright

JS 41:59

Again, it depends on unfortunately, political leaning.

RK 42:06

Yep.

JS 42:06

And it also depends on vaccination or, and you can't pass judgment, because some of these people have actually had the virus, although it doesn't confer permanent immunity.

RK 42:18

Yeah.

JS 42:18

It only gives you at most, we think 90 days.

RK 42:24

Wow. That's

JS 42:25

So.

RK 42:25

Yeah. And just kind of going back to the political thing. Do you think nationally, we've done better since the new administration has it? Do you think the national governments trying their best or

LS 42:37

Oh, yeah, they're try. They're trying.

RK 42:41

They're trying.

JS 42:42

But they're being sabotage on a number of levels, which is very sad. Again, the sabotage has been primarily directed for political reasons.

JS 42:51

Yeah. And it's just, it's just hard to wrap your head around that this is a medical thing. And that's now become so political. And it's just so hard to talk about sometimes because of that. And,

JS 43:02

Yeah.

RK 43:03

It's just weird to think about and, and just going forth with the new omicrom, the new variant, do you think that's the problem?

JS 43:13

Omicron

RK 43:13

Yeah, that one sorry, not very good words.

43:15

Don't worry about it. What we know about it so far, is not enough. And I can tell you what we think we know.

RK 43:27

All right, we'll go with that.

JS 43:28

But I've only got to tell you what we think we know, because that is going to change.

RK 43:32

Yeah.

JS 43:32

We think we know it is more highly infectious.

RK 43:37

All right.

JS 43:37

It carries a string of proteins that possibly were absorbed or like latched on to that came from the common cold.

RK 43:51

All right.

JS 43:51

Which makes it slightly more I actually significantly more infectious. On the other side, it does not seem to be as aggressive and in terms of making somebody sick. But let's flip that around again. And those countries where they're having a significant outbreak of Omicron. Omicron Excuse me. I'm not even saying it right. Omicrom. More children are being hospitalized.

RK 44:21

Oh, yeah.

JS 44:21

So we have a lot to learn.

RK 44:25

Yeah.

JS 44:25

Those people who get very upset because we keep changing our minds. We're not changing our minds. We're just learning.

RK 44:32

Yep.

JS 44:32

And I get again, that's one of my favorite issues [laughter] that this whole thing people complain about Dr. Fauci changing his mind. He's not changing his mind. He's learning. That's the whole process of learning.

RK 44:50

And do you see

JS 44:50

It not a religion its not written in stone.

RK 44:50

Yeah, exactly. Do you think it's gonna affect our lives again, like, do you think we're gonna have more lockdownsdowns, or

44:57

I don't, I don't, I doubt we'll have more lockdowns, but it will be affecting our lives pretty much forever. It's with us forever.

RK 45:06

Yeah.

JS 45:06

The biggest issue is, is there going to be another variant that comes along that like the delta, which is very, very dangerous?

RK 45:16

Yeah.

JS 45:16

And it as people are saying, and I, I kind of agree. It's not if but when there's going to be another variant or another virus that is equally, or more or more dangerous than this one.

RK 45:31

Yeah. And has there been much research on like, our vaccines and how they're handling the new variants? Or is our vaccines are handleing it?

JS 45:40

Oh, they're studying it. They're studying it. Right, left. And again, it's one of those things we have to wait.

Yeah.

Figure this one out. You have to wait for the science to do its job. They're- they're working on it. They're working furiously on it.

But you have to wait.

RK 45:58

Yeah. And that's what we're, we're just in a life of waiting for all these new things.

JS46:02

And we're not good at that.

RK 46:06

Yep. [laughter] We just want answers right now.

JS 46:08

Now, give me an answer.

Rk 46:10

Exactly. And just kind of opening it back up to get some concluding remarks. Like, how has it affected your family life and your friends and your community that you have grown?

Js46:24

Initially before vaccines, it affected my family life, because when my husband got sick children not come out to see him?

RK 46:34

That's gotta be hard.

JS 46:35

They did not get to see him in person while he was alive.

RK46:39

Oh, wow.

JS 46:36

If his vaccination, when they finally did get to see him, he was already comatose.

RK46:44

Oh, wow.

JS 46:46

So right up front, it. It separated my family to the point where we - we couldn't be a family in the in the way that we want it to be.

RK 46:57

Wow, that that's endemically hard.

JS 47:02

Yeah, that was hard.

RK 47:03

Yeah.

JS 47:03

It was particularly hard for them.

RK 47:06

Yeah, I can, I can only imagine just not being able to be there. That's, that's so hard.

JS 47:14

Yep.

RK 47:14

And just like your community said, You made a really good community in Menominee. Do- has that affected like all your networking that you've done?

JS 47:23

 Only as far as that when we get together in larger groups, we wear masks? We don't hug?

RK 47:31

Yep. Were you? Did you keep in contact? Well, did you call a lot video?

JS 47:37

We - we had zoom meetings, we kept a contact, we talked to talk to talk. We did what we needed to do to just keep going. And it became a community effort just to keep going and we did it. It's not something you do on your own?

RK 47:57

Exactly.

JS 47:57

Just like there's no individual freedoms, you're not out there by yourself.

RK 48:03

Yeah.

JS 48:03

You're only out there insofar as you can interact and work with others.

RK 48:08

Yeah. And, um, this is going to be my last question here. How do you think we you've kind of talked about how we're gonna probably have masks forever, but how do you see the future looking like, is it positive or negative? Do you think we're gonna get back to a normal life go? How do you

JS 48:25

There will be a new normal?

RK 48:28

Alright

JS 48:28

There will be a new normal. What it will be? I don't know. Because again, I really don't know where this virus is going. Every time we take we know what what's happening. It turns around and excuse me, bites us in the butt.

RK 48:41

Yeah. Do you think it's gonna be a positive or a negative? Or do you think people are at the point that they're just ready to accept it and whatever comes?

JS 48:52

Probably ready to - they're getting to the point where they're ready to accept it. I mean, the reality can't always you can't continuously evade reality.

RK 49:04

Yeah.

JS 49:04

And the reality is out there. There's just not something you can do. You can't say, Okay, I'm not going to pay attention to this anymore. And it's going to come around and bite you in the butt.

RK 49:17

Exactly. Well, that's all the questions I have for you.

JS 49:23

Alright

RK 49:24

Stop.